

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 46

## BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> <b>COX 2008 COMMITTEE INC</b>		<b>2. IDENTIFICATION NUMBER</b> C00420224	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported Post Office Box 5353			
<b>CITY, STATE, and ZIP CODE</b> Buffalo Grove IL 60089		<b>3. IS THIS REPORT FOR :</b> <input type="checkbox"/> Primary <input type="checkbox"/> General	

**4. TYPE OF REPORT** (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input checked="" type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_

☐ Thirtieth day report following the General Election on \_\_\_\_\_  
 on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

5. COVERING PERIOD	FROM	THROUGH
	02/01/2008	02/29/2008

<b>SUMMARY</b>	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD ..... 2472.89 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) ..... 499.94 8. SUBTOTAL (Lines 6 and 7) ..... 2972.83 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) ..... 570.19 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) ..... 2402.64 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) ..... 0.00 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) ..... 1055000.00 13. EXPENDITURES SUBJECT TO LIMITATION ..... 1075264.87	
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) ..... 22167.51 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) ..... 1051661.61	

**I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.**

Type or Print Name of Treasurer <b>Claremont Ruff</b>	Date 06/09/2008
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b>	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100
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**FEC FORM 3P**  
**(01/2001)**

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 46**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**COX 2008 COMMITTEE INC**

Report Covering the Period

From: 02/01/2008

To: 02/29/2008

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	22167.51
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		0.00	22167.51
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	1055000.00
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	1055000.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	499.94	5857.24
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		499.94	5857.24
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	500.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	499.94	1083524.75
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	570.19	1057518.85
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	23603.26
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	0.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	570.19	1081122.11
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

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**1. NAME OF COMMITTEE (in full)**  
**COX 2008 COMMITTEE INC**
**ADDRESS (number and street)**  
 Post Office Box 5353

**CITY, STATE, and ZIP CODE**  
 Buffalo Grove IL 60089

**2. IDENTIFICATION NUMBER**  
 C00420224

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	1000.00	New Hampshire	0.00	44271.05
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	12.60	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	12.60
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	12.60	North Dakota	0.00	0.00
District of Columbia	0.00	1095.59	Ohio	0.00	0.00
Florida	0.00	12.60	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	40.00	Rhode Island	0.00	0.00
Illinois	0.00	2969.72	South Carolina	0.00	104362.90
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	101182.84	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	1012.60	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	100.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>256085.10</b>

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

COX 2008 COMMITTEE INC

A.

Full Name (Last, First, Middle Initial)

Cardmember Services

Mailing Address

Post Office Box 15298

City

Wilmington

State

DE

Zip Code

19850

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

499.94

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

499.94

Security deposit return

Transaction ID: SA20A.7183

SUBTOTAL of Receipts This Page (optional) .....

499.94

TOTAL This Period (last page this line number only) .....

499.94

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

<b>A.</b> Full Name (Last, First, Middle Initial) Chase Bank Mailing Address 825 West Euclid	<b>Transaction ID:</b> SB23.7162 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 4 / 2 0 0 8</div> </div>
City Palatine State IL Zip Code 60067 Purpose of Disbursement Wire fee Candidate Name COX 2008 COMMITTEE INC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 02	<b>Amount of Each Disbursement this Period</b> <div>12.00</div> <div>101</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Chase Bank Mailing Address 825 West Euclid City Palatine State IL Zip Code 60067 Purpose of Disbursement Bank fee Candidate Name COX 2008 COMMITTEE INC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 02	<b>Transaction ID:</b> SB23.7163 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 9 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>8.00</div> <div>101</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Kimberly McClendon Mailing Address 14500 Roadrunner Way #401 City San Antonio State TX Zip Code 78249 Purpose of Disbursement Salary Candidate Name COX 2008 COMMITTEE INC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 02	<b>Transaction ID:</b> SB23.7164 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>375.00</div> <div>101</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

395.00

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

<b>A.</b> Full Name (Last, First, Middle Initial) Kimberly McClendon	<b>Transaction ID:</b> SB23.7165 <b>Date of Disbursement</b>																				
Mailing Address 14500 Roadrunner Way #401	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	0	8												
City San Antonio State TX Zip Code 78249	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Wire fee	<table border="1"> <tr> <td>-12.00</td> </tr> </table>	-12.00																			
-12.00																					
Candidate Name COX 2008 COMMITTEE INC	<table border="1"> <tr> <td>101</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	101	Category/ Type																		
101																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 02	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Service U Corporation	<b>Transaction ID:</b> SB23.7166 <b>Date of Disbursement</b>																				
Mailing Address 60 Germantown Court Suite 202	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	8		2	0	0	8												
City Cordova State TN Zip Code 38018	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Scheduling	<table border="1"> <tr> <td>49.95</td> </tr> </table>	49.95																			
49.95																					
Candidate Name COX 2008 COMMITTEE INC	<table border="1"> <tr> <td>101</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	101	Category/ Type																		
101																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 02	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) USPS - Buffalo Grove, IL	<b>Transaction ID:</b> SB23.7168 <b>Date of Disbursement</b>																				
Mailing Address 255 North Buffalo Grove Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	8		2	0	0	8												
City Buffalo Grove State IL Zip Code 60089	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Box renewal	<table border="1"> <tr> <td>40.00</td> </tr> </table>	40.00																			
40.00																					
Candidate Name COX 2008 COMMITTEE INC	<table border="1"> <tr> <td>101</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	101	Category/ Type																		
101																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 02	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

77.95

**TOTAL** This Period (last page this line number only) .....

472.95

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4100

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 3Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4101

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3D D  
0 6Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4429

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 4D D  
1 9Y Y Y Y  
2 0 0 6

12/31/2008

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 10 / 46

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4432

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 5D D  
0 4Y Y Y Y  
2 0 0 6

12/31/2008

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4433

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 5D D  
1 0Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4434

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 5D D  
1 1Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4435

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 6D D  
2 0Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4457

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
1 4Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4456

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
2 8Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4458

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 8D D  
1 4Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4459

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 8D D  
2 8Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4460

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
1 3Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4461

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 0Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

30000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4462

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 8Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4782

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 0D D  
1 2Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4783

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 0D D  
2 6Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4784

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
0 8Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4785

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
3 0Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P**Use separate schedule(s)  
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Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4786

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
0 6Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.4787

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
2 2Y Y Y Y  
2 0 0 6

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5197

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 1D D  
0 9Y Y Y Y  
2 0 0 7

12/31/2008

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5198

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

40000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

40000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 1D D  
1 6Y Y Y Y  
2 0 0 7

12/31/2008

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

40000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5199

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 1D D  
2 9Y Y Y Y  
2 0 0 7

12/31/2008

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5200

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 6Y Y Y Y  
2 0 0 7

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5201

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
1 2Y Y Y Y  
2 0 0 7

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

30000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5202

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3D D  
0 1Y Y Y Y  
2 0 0 7

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



## Schedule C-P

Use separate schedule(s)  
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Detailed Summary Page

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## LOANS

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5203

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3D D  
1 4Y Y Y Y  
2 0 0 7

12/31/08

5.10 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

## Schedule C-P

Use separate schedule(s)  
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## LOANS

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5574

LOAN SOURCE Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

## TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 4D D  
0 4Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

25000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5575

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 4D D  
1 5Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5576

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 5D D  
0 2Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

50000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5577

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 5D D  
1 6Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
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Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5578

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 6D D  
1 3Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5579

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 6D D  
1 4Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.5580

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.6136

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
3 1Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

30000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.6137

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 8D D  
2 2Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.6138

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
0 5Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

25000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.6139

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 0Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.7036

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 0D D  
0 2Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

20000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19bNAME OF COMMITTEE (In Full)  
COX 2008 COMMITTEE INC

Transaction ID: SC/12.7037

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
John H. Cox - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 55 East Erie

City Chicago State IL ZIP Code 60611

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
0 3Y Y Y Y  
2 0 0 7

12/31/08

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

**TOTALS** This Period (last page in this line only) ▶

1055000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.